## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In reapplication of: Hidenori KIN et al. Serial No. 10/597.810

Confirmation No. 6629 Filed: August 8, 2006

Image Forming Apparatus, Toner Counter and Method

of Calculating Toner Consumption Amount

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir.

Art Unit: 2852

Examiner: Roth, Laura K

> I hereby certify that this correspondence is being transmitted via electronic filing to:

Mail Stop Amendment Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450 November 2, 2009 Date of Deposit

Juanita Soberanis Name

11/2/2009 Signature Date

Transmitted herewith is a Supplemental Amendment in the above-identified application.

## No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR		(Col. 3) PRESENT EXTRA*	LG/S \$ ENTITY		ADD'L FEE DUE	
TOTAL CLAIMS FEE	47	-	49	**	0	LG=\$52 SM=\$26	\$52	s	,0
INDEPENDENT CLAIMS FEE	15	-	15	***	0	LG=\$220 SM=\$110	\$220	\$	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS  LARGE ENTITY FEE = \$390 SMALL ENTITY FEE = \$195								\$	0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) \$270 FOR EACH ADDITIONAL 50 SHEETS								\$	0
Independent Claims: 1, 6, 13, 21, 31, 39, 41-49 TOTAL .								\$	D

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Please charge the amount of \$-0- to cover the additional claims fee to Deposit Account No. 50-1314.

Please charge the amount of \$-0- to cover the extension fee to Deposit Account No. 50-1314.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, HOGAN & HARTSON L.L.P.

Date: November 2, 2009

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